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| MULTIPLE DEPENDENT CLAIM<br>FEE CALCULATION SHEET<br>Substitute for Form PTO-1360<br>(For use with Form PTO/SB/06) |                           |        |                          |        |                           |        | Application Number<br><b>10/774,721</b>           |        | Filing Date |        |  |
|--|---------------------------|--------|--------------------------|--------|---------------------------|--------|---|--------|-------------|--------|--|
|  |                           |        |                          |        |                           |        | Applicant(s)                                      |        |             |        |  |
|  |                           |        |                          |        |                           |        | * May be used for additional claims or amendments |        |             |        |  |
| CLAIMS   | APPLIED<br><b>3-10-06</b> |        | AFTER FIRST<br>AMENDMENT |        | AFTER SECOND<br>AMENDMENT |        |   |        |             |        |  |
|  | Indep                     | Depend | Indep                    | Depend | Indep                     | Depend | Indep   | Depend | Indep       | Depend |  |
| 1  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 2  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 3  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 4  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 5  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 6  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 7  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 8  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 9  |                           |        |                          |        |                           |        |   |        |             |        |  |
| 10   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 11   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 12   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 13   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 14   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 15   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 16   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 17   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 18   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 19   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 20   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 21   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 22   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 23   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 24   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 25   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 26   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 27   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 28   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 29   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 30   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 31   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 32   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 33   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 34   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 35   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 36   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 37   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 38   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 39   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 40   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 41   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 42   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 43   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 44   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 45   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 46   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 47   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 48   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 49   |                           |        |                          |        |                           |        |   |        |             |        |  |
| 50   |                           |        |                          |        |                           |        |   |        |             |        |  |
| Total<br>Indep   |                           |        |                          |        |                           |        |   |        |             |        |  |
| Total<br>Depend  |                           |        |                          |        |                           |        |   |        |             |        |  |
| Total<br>Claims  |                           |        |                          |        |                           |        |   |        |             |        |  |

This collection of information is required by 37 CFR 1.49. The information is required to submit an application to the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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